

**Exhibit A**

**Administrative Record**

**§a(1)**

**CITY OF SAN LEANDRO**Community Development Department • Planning Services Division  
835 East 14th Street • San Leandro, CA 94577 • (510) 577-3371 • Fax: (510) 577-6007**PLANNING PERMIT  
APPLICATION***Please type or print legibly.*Project Address: 14600 Catalina St Assessor's Parcel Number: 080-G-0933-022-01*Please check all applicable permits.*

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Fence Modification              | <input type="checkbox"/> Planned Development | <input type="checkbox"/> Site Plan Review: |
| <input type="checkbox"/> Variance               | <input checked="" type="checkbox"/> Zoning Map Amendment | <input type="checkbox"/> Other _____         | Δ Major                                    |
| <input type="checkbox"/> Parking Exception      | <input type="checkbox"/> Tentative Map                   |  | Δ Minor                                    |
|   |  |  | Δ RS-VP                                    |

*Please describe the project associated with your application request. (Attach additional sheets if necessary.)*  
Purchase and occupation of property located at 14600 Catalina, for the  
purpose of a house of worship

*Please provide a supporting statement for your application request. (Attach additional sheets if necessary.)*  
See attached sheet

Applicant ( ☐ owner ☐ lessee ☐ other ): pending ownerLegal Name ( ☐ individual ☐ corporation ☐ joint venture ☐ partnership ): ICFG San Leandro #2Mailing Address: 577 Manor Blvd Work Phone: (510) 357 5723City: San Leandro State: Ca Zip: 94579 Home Phone: (510) 656 5695Email Address (optional): sm@Faith-Fellowship.US Cell Phone: (510) 773 8500

I (We) hereby certify under penalty of perjury that I (we) join in said application and that the statements and information contained herein are in all respects true and correct.

Date: 5-11-06 Applicant's Signature: [Signature] for pastor Gary Montano

Property Owner (if the applicant is not the owner): \_\_\_\_\_

Legal Name ( ☐ individual ☐ corporation ☐ joint venture ☐ partnership ): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Email Address (optional): \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

I (We) hereby certify under penalty of perjury that I (we) join in said application and that the statements and information contained herein are in all respects true and correct.

Date: \_\_\_\_\_ Property Owner's Signature: \_\_\_\_\_

**TO BE COMPLETED BY CITY STAFF**

Project #: PLN \_\_\_\_\_

Date/Received: \_\_\_\_\_ By: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Reviewing Body: \_\_\_\_\_

Fee/Deposit \_\_\_\_\_

Code Section: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

paid: \_\_\_\_\_

Redevelopment: ☐ Plaza ☐ Joint ☐ WSL/Mac

Receipt \_\_\_\_\_

# \_\_\_\_\_

Environmental: ☐ Exempt ☐ Neg Dec ☐ EIR

Customer #: \_\_\_\_\_

Staff Comments: \_\_\_\_\_